

James D. Reed
Paralegal Specialist

SERIAL NO.
08/765244

APPLICANT(S)

FILING DATE

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	IND.	DEP.	IND.	DEP.	IND.	DEP.	
	IND.	DEP.	IND.	DEP.	IND.	DEP.								
	1	1	1	1	1	1		51	1	1	1	1	1	1
2	1	1	1	1	1	1	52	1	1	1	1	1	1	1
3	2	1	1	1	1	1	53	1	1	1	1	1	1	1
4	1	1	1	1	1	1	54	1	1	1	1	1	1	1
5	1	1	1	1	1	1	55	1	1	1	1	1	1	1
6	1	1	1	1	1	1	56	1	1	1	1	1	1	1
7	1	1	1	1	1	1	57	1	1	1	1	1	1	1
8	1	1	1	1	1	1	58	1	1	1	1	1	1	1
9	1	1	1	1	1	1	59	1	1	1	1	1	1	1
10	1	1	1	1	1	1	60	1	1	1	1	1	1	1
11	1	1	1	1	1	1	61	1	1	1	1	1	1	1
12	1	1	2	1	1	1	62							
13	1	1	2	1	1	1	63							
14	1	1	2	1	1	1	64							
15	1	1	2	1	1	1	65							
16	1	1	2	1	1	1	66							
17	1	1	1	1	1	1	67							
18	1	1	1	1	1	1	68							
19	1	1	1	1	1	1	69							
20	1	1	1	1	1	1	70							
21	1	1	1	1	1	1	71							
22	1	1	1	1	1	1	72							
23	1	1	1	1	1	1	73							
24	1	1	1	1	1	1	74							
25	1	1	1	1	1	1	75							
26	1	1	1	1	1	1	76							
27	1	1	1	1	1	1	77							
28	1	1	1	1	1	1	78							
29	1	1	1	1	1	1	79							
30	1	1	1	1	1	1	80							
31	1	1	1	1	1	1	81							
32	1	1	1	1	1	1	82							
33	1	1	1	1	1	1	83							
34	1	1	1	1	1	1	84							
35	1	1	1	1	1	1	85							
36	1	1	1	1	1	1	86							
37	1	1	1	1	1	1	87							
38	1	1	1	1	1	1	88							
39	1	1	1	1	1	1	89							
40	1	1	1	1	1	1	90							
41	1	1	1	1	1	1	91							
42	1	1	1	1	1	1	92							
43	1	1	1	1	1	1	93							
44	1	1	1	1	1	1	94							
45	1	1	1	1	1	1	95							
46	1	1	1	1	1	1	96							
47	1	1	1	1	1	1	97							
48	1	1	1	1	1	1	98							
49	1	1	1	1	1	1	99							
50	1	1	1	1	1	1	100							
TOTAL IND.	2	1	2	1	1	1								
TOTAL DEP.			70	1	1	1								
TOTAL CLAIMS	61		72											

BEST AVAILABLE COPY